Effective October 1, 2003 D9 688 854												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER TH				
TC	TAL CLAIMS					•		RATE	FEE		RATE	FEE
FO	R .	·	NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			minus 20=		•	·		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		•			X43=		OR	X86=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL]	TOTAL	
CLAIMS AS AMENDED - PART II OTHER												
(Column 1) (Column 2) (Column 3)								SMALL		OR	SMALL	
NT 🎉		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 30	Minus	**	30	= /		X\$ 9=		OR	X\$18=	
	Independent	. 4	Minus			= /		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+145=		OR	+290=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
4.	1206.	(Column 1)		(Colun	nn 2)	(Column 3)	_	ODII. FEE				
AMENDMENT B	E	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER XUSLY.	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• · · 30,	Minus	•	30	= /		X\$ 9=		OR	X\$18=	
	Independent	. 4	Minus			- /		X43=.	•	OR	X86=	,
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL DOIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)						
AMENDMENT &	F	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		e		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		-		X43=,.		OR	X86=	
_	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		I ŀ	+145=			+290=	
	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	TOTAL	
	the "Highest Nu I the "Highest Nu	mber Previously Pa mber Previously Pa	id For IN THE	S SPACE IS S SPACE IS	i less that Liess tha	n 20, enter "20." n 3, enter "3."		DDIT. FEE			NOOIT. FEE	
•	The "Highest Num	ber Previously Pal	d For (Total or	Independe	ent) is the	highest numbe	er four	nd in the app	ropriate box	in cot	uma 1.	

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Application or Docket Number